



**ARMSTRONG<sup>®</sup>**  
**TELEPHONE COMPANY NORTH**

DOCKET FILE COPY ORIGINAL

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OCT 29 2013  
FCC Mail Room

ONE ARMSTRONG PLACE • BUTLER, PA 16001 • 724-283-0925 • Fax 283-9655

**REDACTED- FOR PUBLIC INSPECTION**

October 11, 2013

**VIA OVERNIGHT DELIVERY**

Marlene H. Dortch, Secretary  
Federal Communications Commission  
Office of the Secretary  
445 12<sup>th</sup> Street, S.W.  
Washington, DC 20554

RE: **Confidential Financial Information Subject to Protective Order in WC Docket Nos. 10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, GN Docket No. 09-51, WT Docket No. 10-208, Before the Federal Communications Commission**

Dear Ms. Dortch:

Armstrong Telephone Company – North ("NAME"), a privately-held rate of return carrier receiving high cost support, has electronically submitted FCC Form 481 to the Commission with redacted financial data, in compliance with 47 C.F.R. §§ 54.313 and 54.422

As specified in the Protective Order issued on November 16, 2012 by the Commission, two copies of the redacted confidential information are being filed simultaneously with the non-redacted confidential information. The redacted information for this filing and each page of the file where confidential information has been omitted is marked "REDACTED - FOR PUBLIC INSPECTION"

Please feel free to contact me with any questions regarding this particular matter.

Sincerely,

James W. Ranko  
Controller

Enclosures

.cc Pennsylvania Public Utility Commission

No. of Copies rec'd 0+2  
List ABCDE

<b>FCC Form 481 - Carrier Annual Reporting</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0086/OMB Control No. 3060-0819 July 2013
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 OCT 23 2013

<b>&lt;010&gt; Study Area Code</b>	170195
<b>&lt;015&gt; Study Area Name</b>	ARMSTRONG TEL NORTH
<b>&lt;020&gt; Program Year</b>	2014
<b>&lt;030&gt; Contact Name: Person USAC should contact with questions about this data</b>	James W Ranko
<b>&lt;035&gt; Contact Telephone Number: Number of the person identified in data line &lt;030&gt;</b>	724-283-0925
<b>&lt;039&gt; Contact Email Address: Email of the person identified in data line &lt;030&gt;</b>	jranko@agoc.com

FCC Mail Room

ANNUAL REPORTING FOR ALL CARRIERS			54,313 Completion Required	54,422 Completion Required
			(check box when complete)	
<b>&lt;100&gt; Service Quality Improvement Reporting</b>	(complete attached worksheet)	<input checked="" type="checkbox"/>		
<b>&lt;200&gt; Outage Reporting (voice)</b>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>&lt;210&gt;</b> <input checked="" type="checkbox"/> <-- check box if no outages to report				
<b>&lt;300&gt; Unfulfilled Service Requests (voice)</b>	0	<input checked="" type="checkbox"/>		
<b>&lt;310&gt; Detail on Attempts (voice)</b>				
<b>&lt;320&gt; Unfulfilled Service Requests (broadband)</b>	0	<input checked="" type="checkbox"/>		
<b>&lt;330&gt; Detail on Attempts (broadband)</b>				
<b>&lt;400&gt; Number of Complaints per 1,000 customers (voice)</b>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>&lt;410&gt; Fixed</b>	0.0			
<b>&lt;420&gt; Mobile</b>	0.0			
<b>&lt;430&gt; Number of Complaints per 1,000 customers (broadband)</b>		<input checked="" type="checkbox"/>		
<b>&lt;440&gt; Fixed</b>	0.0			
<b>&lt;450&gt; Mobile</b>	0.0			
<b>&lt;500&gt; Service Quality Standards &amp; Consumer Protection Rules Compliance</b>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>&lt;510&gt;</b> 170195pa510	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>&lt;600&gt; Functionality in Emergency Situations</b>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>&lt;610&gt;</b> 170195pa610	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>&lt;700&gt; Company Price Offerings (voice)</b>	(complete attached worksheet)			
<b>&lt;710&gt; Company Price Offerings (broadband)</b>	(complete attached worksheet)			
<b>&lt;800&gt; Operating Companies and Affiliates</b>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>&lt;900&gt; Tribal Land Offerings (Y/N)?</b> <input type="radio"/> <input checked="" type="radio"/>	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>		
<b>&lt;1000&gt; Voice Services Rate Comparability</b>	(check to indicate certification)			
<b>&lt;1010&gt;</b>	(attach descriptive document)			
<b>&lt;1100&gt; Terrestrial Backhaul (Y/N)?</b> <input checked="" type="radio"/> <input type="radio"/>	(if not, check to indicate certification)	<input checked="" type="checkbox"/>		
<b>&lt;1110&gt;</b>	(complete attached worksheet)			
<b>&lt;1200&gt; Terms and Condition for Lifeline Customers</b>	(complete attached worksheet)			

**Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet**  
 Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<b>&lt;2000&gt;</b>	(check to indicate certification)	<input type="checkbox"/>		
<b>&lt;2005&gt;</b>	(complete attached worksheet)			

**Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet**

<b>&lt;3000&gt;</b>	(check to indicate certification)	<input checked="" type="checkbox"/>		
<b>&lt;3005&gt;</b>	(complete attached worksheet)	<input checked="" type="checkbox"/>		

**(100) Service Quality Improvement Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	170195
<015>	Study Area Name	ARMSTRONG TEL NORTH
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
<035>	Contact Telephone Number - Number of person identified in data line <030>	724-283-0925
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) <input type="radio"/> <input checked="" type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no ) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

- <112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

\_\_\_\_\_  
Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets  
 <114> Report how much universal service (USF) support was received  
 <115> How (USF) was used to improve service quality  
 <116> How (USF) was used to improve service coverage  
 <117> How (USF) was used to improve service capacity  
 <118> Provide an explanation of network improvement targets not met in the prior calendar year.


<010>	Study Area Code	170195
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

[illegible]

**(700) Price Offerings including Voice Rate Data  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code	170195
-----------------------	--------

<015>	Study Area Name	ARMSTRONG TEL NORTH
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<020> Program Year	2014
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<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
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<035>	Contact Telephone Number - Number of person identified in data line <030>	724-283-0925
-------	---	--------------

<039> Contact Email Address - Email Address of person identified in data line <030> jranko@agoc.com

<701> Residential Local Service Charge Effective Date

1/1/2013

**<702> Single State-wide Residential Local Service Charge**

1/1/2013
----------

<703>

[illegible]

<b>(710) Broadband Price Offerings</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986 / OMB Control No. 3060-0819 July 2013
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

[illegible]

(800) Operating Companies  
Data Collection Form

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com
<810>	Reporting Carrier	Armstrong Tel North
<811>	Holding Company	Armstrong Group of Companies
<812>	Operating Company	Armstrong Tel North

[illegible]

**(900) Tribal Lands Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

&lt;910&gt; Tribal Land(s) on which ETC Serves

&lt;920&gt; Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions;
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes, No, NA)



**(1100) No Terrestrial Backhaul Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

<1120> Please check this box to confirm no terrestrial backhaul  
options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box to confirm the reporting carrier offers  
broadband service of at least 1 Mbps downstream and 256 kbps  
upstream within the supported area pursuant to § 54.313(G) ☒

**(1200) Terms and Condition for Lifeline Customers**  
**Lifeline**  
**Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819  
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<1210> Terms & Conditions of Voice Telephony Lifeline Plans

170195pa1210

Name of attached document (.pdf)

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,



<1222> Details on the number of minutes provided as part of the plan,



<1223> Additional charges for toll calls, and rates for each such plan.



**(2000) Price Cap Carrier Additional Documentation****Data Collection Form***Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

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<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

**Incremental Connect America Phase I reporting**

- <2010> 2nd Year Certification {47 CFR § 54.313(b)(1)} ☐
- <2011> 3rd Year Certification {47 CFR § 54.313(b)(2)} ☐

**Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}**

- <2012> 2013 Frozen Support Certification ☐
- <2013> 2014 Frozen Support Certification ☐
- <2014> 2015 Frozen Support Certification ☐
- <2015> 2016 and future Frozen Support Certification ☐

**Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}**

- <2016> Certification Support Used to Build Broadband ☐

**Connect America Phase II Reporting {47 CFR § 54.313(e)}**

- <2017> 3rd year Broadband Service Certification ☐
- <2018> 5th year Broadband Service Certification ☐
- <2019> Interim Progress Certification ☐
- <2020> Please check the box to confirm that the attached PDF, on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

<010>	Study Area Code	170195
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<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

### Progress Report on 5 Year Plan

- |        |   |  |  |
|--------|---|--|--|
| (3010) | Milestone Certification (47 CFR § 54.313(f)(1)(i))<br>Please check this box to confirm that the attached PDF, on line 3012,   | Name of Attached Document Listing Required Information | <input type="checkbox"/>                     |
| (3011) | contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.  |  |  |
| (3012) | Community Anchor Institutions (47 CFR § 54.313(f)(1)(iii))  | Name of Attached Document Listing Required Information | <input checked="" type="checkbox"/> (Yes/No) |
| (3013) | Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))  |  | <input type="checkbox"/> (Yes/No)            |
| (3014) | If yes, does your company file the RUS annual report<br>Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  |  |  |
| (3015) | Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)   |  | <input type="checkbox"/>                     |
| (3016) | PDF of Balance Sheet, Income Statement and Statement of Cash Flows  |  | <input checked="" type="checkbox"/>          |
| (3017) | If the response is yes on line 3014, attach your company's RUS annual report and all required documentation   | Name of Attached Document Listing Required Information |  |
| (3018) | If the response is no on line 3014, is your company audited?<br>If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains :   |  | <input checked="" type="checkbox"/> (Yes/No) |
| (3019) | Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications   |  | <input checked="" type="checkbox"/>          |
| (3020) | PDF of Balance Sheet, Income Statement and Statement of Cash Flows  |  | <input checked="" type="checkbox"/>          |
| (3021) | Management letter issued by the independent certified public accountant that performed the company's financial audit.<br>If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:<br>Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, |  | <input checked="" type="checkbox"/>          |
| (3022) | Underlying information subjected to a review by an independent certified public accountant  |  | <input type="checkbox"/>                     |
| (3023) | Underlying information subjected to an officer certification.   |  | <input type="checkbox"/>                     |
| (3024) | PDF of Balance Sheet, Income Statement and Statement of Cash Flows  |  | <input type="checkbox"/>                     |
| (3025) | Attach the worksheet listing required information   | Name of Attached Document Listing Required Information | 170195pa3026                                 |

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<b>Certification - Reporting Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or U Recipients</b>	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	ARMSTRONG TEL NORTH
Signature of Authorized Officer:	CERTIFIED ONLINE Date 10/10/2013
Printed name of Authorized Officer:	James Mitchell
Title or position of Authorized Officer:	Vice President
Telephone number of Authorized Officer:	7242830925
Study Area Code of Reporting Carrier:	170195 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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<b>Certification - Agent / Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	170195
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<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	James W Ranko
<035> Contact Telephone Number - Number of person identified in data line <030>	724-283-0925
<039> Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

<b>Certification of Officer to Authorize an Agent to File Annual Reports for CAF or U Recipients on Behalf of Reporting Carrier</b>	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

<b>Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier</b>	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	
Name of Authorized Agent or Employee of Agent:	
Signature of Authorized Agent or Employee of Agent:	Date:
Printed name of Authorized Agent or Employee of Agent:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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Attachments

**(800) Operating Companies  
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<810>	Reporting Carrier	Armstrong Tel North
<811>	Holding Company	Armstrong Group of Companies
<812>	Operating Company	Armstrong Tel North

<813>

<a1>

<a2>

<a3>

## Affiliates

**SAC**

### Doing Business As Company or Brand Designation

Armstrong Tel of MD

180216

Armstrong Telephone Company-Maryland

Armstrong Tel Co-NY

150071

Armstrong Telephone Company-New York

Armstrong Tel Co-PA

170189

Armstrong Telephone Company-Pennsylvania

Armstrong of WV

200256

Armstrong Telephone Company-West Virginia

Armstrong Tel. Co.

200267

Armstrong Telephone Company-Northern Division

Armstrong Telecommunications, Inc.

Armstrong Telecommunications, Inc.

Armstrong Digital Services, Inc.

Armstrong Digital Services, Inc.





**ARMSTRONG<sup>®</sup>**  
**TELEPHONE COMPANY NORTH**

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**§54.313(a)(5) – COMPLIANCE WITH SERVICE QUALITY STANDARDS AND CONSUMER PROTECTION**

Pursuant to 47 C.F.R. § 54.313(a)(5) and or 47 C.F.R. § 54.422(b)(3) Armstrong Telephone Company – North ("the Company") is in compliance with appropriate FCC Service Quality Standards and Consumer Protection Rules. The Company provides CPNI training to all of its new employees and in addition trains all of its existing employees on an annual basis. The Company also conducts subscriber outreach regarding CPNI by periodically placing CPNI explanation messages into subscriber's bills and also has signage in its business office regarding CPNI rules and regulations. In addition the Company trains staff on Red Flag issues on an annual basis. All company employees are required to sign and acknowledge that they have completed CPNI and Red Flag training and understand obligations to adherence of applicable rules.

Name of Officer (Print) James D. Mitchell

Title: Vice President

Signature 

Date: 10/7/13



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**§54.313(a)(6) – ABILITY TO FUNCTION IN EMERGENCY SITUATIONS**

I am authorized to provide this certification on behalf of Armstrong Telephone Company-North (the "Company"). I hereby certify that, to the best of my knowledge, the Company is capable of functioning in emergency situations. The Company has a reasonable amount of back-up power to ensure functionality of voice services without a commercial power source. The company's specific back-up power sources are, lead calcium batteries, gel cell batteries, fixed AC and DC natural/LP gas generators, fixed AC and DC gasoline/diesel generators and portable gasoline generators. The Company is able to reroute voice traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. If there is a failure of the Company's main route, voice traffic is automatically rerouted to the back-up route.

Name of Officer (Print) James D. Mitchell

Title: Vice President

Signature *James D. Mitchell*

Date: 10/7/13

Armstrong Telephone  
Company-North

Section 3  
Second Revised Sheet 8  
Cancels First Revised Sheet 8

LIFELINE SERVICE

C. LIFELINE SERVICE DIAL TONE LINE MONTHLY RATE

1. Applicable Residence Dial Tone monthly rate minus \$1.75 (1)
2. Lifeline Service customers will be billed the applicable Subscriber Line Charge monthly rate and will be given credit for the same amount of the Subscriber Line Charge as prescribed by the Federal Communications Commission at Docket Nos. 00-256, 96-45, 98-77, 98-166, and 00-193.
3. Lifeline Service is subject to all applicable state, local and federal taxes, and Surcharges, and to all applicable tariff rates, charges, surcharges and regulations

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NOTE:

- (1) The Dial Tone Line and Subscriber Line Charge monthly rate discounts will be reduced to the extent that application of the full discount would not result in rates that are less than zero.

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(C) Indicates Change

Issued: December 31, 2001

Effective: January 1, 2002

Armstrong Telephone  
Company-North

Section 3  
Second Revised Sheet 5  
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LIFELINE SERVICE

OCT 29 2013

A. DESCRIPTION

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Lifeline Service is a Residence offering for low-income customers who qualify for this service

in accordance with the following Regulations. NOTE: Customers who qualify for Lifeline Service may also qualify for Link Up America Service.

B. REGULATIONS

1. Lifeline Service is available to qualified residence customers and is provided via a residence individual Dial Tone Line. Lifeline Service is limited to only one Service per qualified customer or household. A potential Lifeline customer who has an outstanding final bill for telephone service which is less than (4) years old must pay the entire balance of any Basic Service final bill before being eligible for Lifeline Service.
2. Residence Lifeline Service consists of the following tariffed standard features and optional customer elected services at the applicable rates, charges and regulations for each feature and service provided:
  - a. One-Party Residence Line Rate or Local Measured Service Option
  - b. Directory Listing (standard only).
  - c. Non-Published or Non-Listed Telephone Number Service.
  - d. Access to Directory Assistance Service.
  - e. Touch-Tone Calling Service.
  - f. Access to Message Toll Telephone Service and Optional Dial Station-To-Station Calling Plan Services. However, the Residence Lifeline Dial Tone Line will be blocked from dial station access to 976/556/900 and any other type of Audiotex Service.
  - g. Access to Operator Services.
  - h. Voluntary Toll Restriction Option.
  - i. Link Up America (if eligible).
  - j. Access to 800/888 Services.
  - k. Access to Call Trace.
  - l. Access to Alerting and Reporting Systems (9-1-1 dialing).
  - m. Access to the Pennsylvania Telecommunications Relay Service.
  - n. Caller ID Per-call and Per-line Blocking
  - o. Other eligible telecommunications services at tariffed rates.
  - \* \* \*

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Armstrong Telephone  
Company-North

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# LIFELINE SERVICE

## B. REGULATIONS (cont'd)

- c. An applicant for Lifeline Service must be a current participant in one of the following Pennsylvania programs, or be able to provide proof of household income which is at or below 135% of the annual Federal Poverty Guidelines for all States (except Alaska and Hawaii) and the District of Columbia. Recertification of a representative sample of Lifeline Service participants will be conducted annually by Armstrong Telephone Company-North.

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### Pennsylvania Department of Public Welfare Lifeline Service Programs:

- \* Temporary Assistance for Needy Families (TANF)
- \* General Assistance (GA)
- \* Supplemental Security Income (SSI)
- \* Medicaid
- \* Food Stamps
- \* Low Income Home Energy Assistance Program (LIHEAP)

### Additional Eligible Programs (Federal)

- \* Federal Public Housing
- \* National School Free Lunch Program

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The DPW Programs listed above must be certified by DPW. Such certification by DPW will be provided only when a DPW client requests Lifeline Service based on the client's status as a participant in any of the above eligibility programs. Certification by DPW will be limited to confirmation of the client's program status (i.e., participation or non-participation). Participation by DPW is subject to execution of an agreement with DPW and Armstrong Telephone Company-North.

4. Lifeline Service will be provided to a customer only so long as such customer continues to meet the participation and certification guidelines in B-3 above. At the time of initial establishment of Lifeline Service, the customer agrees to have his or her eligibility recertified as determined by Armstrong Telephone Company-North. When Armstrong Telephone Company-North is notified by the customer or determines through recertification that the Lifeline Service customer is no longer a participant in the DPW programs in B.3. above or otherwise low-income eligible, the customer will be notified (by telephone or letter) that the Lifeline Service rate is no longer applicable. Within the stated customer notification period (10 working days from the date of the notification), the customer can contact the Company to negotiate new Dial Tone Service arrangements at applicable tariff rates (no connection charges will apply for existing services or options retained). If the customer does not contact the Company by the end of the notification period, the Lifeline Service will be changed to applicable Exchange Area Dial Tone Line service at existing tariff rates (no connection charges will apply to existing services or options retained). Upon contacting the Company, the customer will have ten (10) working days to complete the low-income certification or recertification process in order to retain Lifeline Service.

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LIFELINE SERVICE

B. REGULATIONS (cont'd)

5. A Lifeline Service customer may not subscribe to any other type of residence Local Exchange Service at the same or other premises. Lifeline Service will not be provided via Foreign Exchange or Foreign Central Office Service arrangements.
6. Only services listed in B (2) above will be provided to Lifeline customers. (C)
7. Lifeline Service customers are required to apply for the Link Up America benefit when applicable.
8. Customer requested temporary suspension of Lifeline Service is not permitted.
9. Lifeline Service does not apply to applicants who are full time students living in university or college controlled housing.
10. The applicant must not be a dependent for Federal Income Tax purposes, unless he or she is 60 years of age or older.
11. Lifeline customers are subject to all Residence service regulations in this and other tariffs of Armstrong Telephone Company-North.
12. Residence Lifeline Service cannot be resold by the Lifeline customer or the Lifeline customer's agent(s).
13. Resale of Lifeline Services are subject to wholesale rate obligations under Section 251 (c)(4) of the Telecommunications Act of 1996.
14. All outstanding charges, account balances and service restrictions apply to existing customers who qualify for Lifeline Service. Service restrictions will remain until the arrearage(s) have been paid in full.
15. Any Lifeline customer who has a past due balance of Toll Charges will be treated with the appropriate Chapter 64 regulations. The Residence Toll Restoral Charge applies to Lifeline Customers who are suspended for non-payment and who subsequently pay their outstanding toll charges and request toll restoral. If a Lifeline customer is toll restricted for a second occurrence the Company may, at its discretion, place the Lifeline customer on permanent toll restriction.
16. Toll-Blocking and Toll-Control services will be provided at no charge to Lifeline Service subscribers, to the extent that they are offered.

(C) Indicates Change

Armstrong Telephone  
Company-North

Section 3  
Second Revised Sheet 8  
Cancels First Revised Sheet 8

LIFELINE SERVICE

C. LIFELINE SERVICE DIAL TONE LINE MONTHLY RATE

1. Applicable Residence Dial Tone monthly rate minus \$1.75 (1)
2. Lifeline Service customers will be billed the applicable Subscriber Line Charge monthly rate and will be given credit for the same amount of the Subscriber Line Charge as prescribed by the Federal Communications Commission at Docket Nos. 00-256, 96-45, 98-77, 98-166, and 00-193. (C)
3. Lifeline Service is subject to all applicable state, local and federal taxes, and Surcharges, and to all applicable tariff rates, charges, surcharges and regulations (C)

NOTE:

- (1) The Dial Tone Line and Subscriber Line Charge monthly rate discounts will be reduced to the extent that application of the full discount would not result in rates that are less than zero.

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**MOSS ADAMS** LLP  
Chartered, Idaho, Accountant, CPAs, Certified Public Accountants

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**REPORT OF INDEPENDENT AUDITORS**

Board of Directors

Armstrong Telephone Company - North, Inc.

We have audited the accompanying balance sheets of Armstrong Telephone Company - North, Inc. (Company) as of September 30, 2012 and 2011, and the related statements of income, stockholder's equity, and cash flows for the years then ended. These financial statements are the responsibility of the Company's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Armstrong Telephone Company - North, Inc. as of September 30, 2012 and 2011, and the results of its operations and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

*Moss Adams LLP*

Spokane, Washington

January 4, 2013



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## ARMSTRONG TELEPHONE COMPANY - NORTH, INC. BALANCE SHEETS

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### ASSETS

	September 30,	
	2012	2011
<b>CURRENT ASSETS</b>		
Cash and cash equivalents	\$ [REDACTED]	\$ [REDACTED]
Subscriber accounts receivable, net of allowance of \$ [REDACTED] and \$ [REDACTED] in 2012 and 2011, respectively	[REDACTED]	[REDACTED]
Other accounts receivable, net of allowance of \$ [REDACTED] and \$ [REDACTED] in 2012 and 2011, respectively	[REDACTED]	[REDACTED]
Materials and supplies	[REDACTED]	[REDACTED]
Other current assets	[REDACTED]	[REDACTED]
Total current assets	[REDACTED]	[REDACTED]
<b>NONCURRENT ASSETS</b>		
Other noncurrent assets	[REDACTED]	[REDACTED]
<b>PROPERTY, PLANT, AND EQUIPMENT</b>		
Telecommunications plant in service	[REDACTED]	[REDACTED]
Nonregulated plant in service	[REDACTED]	[REDACTED]
Telecommunications plant under construction	[REDACTED]	[REDACTED]
Less accumulated depreciation	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]
	\$ [REDACTED]	\$ [REDACTED]

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## ARMSTRONG TELEPHONE COMPANY - NORTH, INC. BALANCE SHEETS

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### LIABILITIES AND STOCKHOLDER'S EQUITY

	September 30,	
	2012	2011
<b>CURRENT LIABILITIES</b>		
Accounts payable	\$ [REDACTED]	\$ [REDACTED]
Advance billing	[REDACTED]	[REDACTED]
Other accrued liabilities	[REDACTED]	[REDACTED]
Income taxes payable, parent company	[REDACTED]	[REDACTED]
	<hr/>	<hr/>
Total current liabilities	[REDACTED]	[REDACTED]
	<hr/>	<hr/>
<b>OTHER LIABILITIES AND DEFERRED CREDITS</b>		
Deferred income taxes	[REDACTED]	[REDACTED]
	<hr/>	<hr/>
<b>STOCKHOLDER'S EQUITY</b>		
Common stock (\$ [REDACTED] par value; [REDACTED] shares authorized, [REDACTED] shares issued and outstanding)	[REDACTED]	[REDACTED]
Additional paid-in capital	[REDACTED]	[REDACTED]
Retained earnings	[REDACTED]	[REDACTED]
	<hr/>	<hr/>
	[REDACTED]	[REDACTED]
	<hr/>	<hr/>
	\$ [REDACTED]	\$ [REDACTED]
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See accompanying notes.

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## ARMSTRONG TELEPHONE COMPANY - NORTH, INC. STATEMENTS OF INCOME

	Years Ended September 30,	
	2012	2011
Operating revenues		
Wireline		
Customer	\$ [REDACTED]	\$ [REDACTED]
Intercarrier	[REDACTED]	[REDACTED]
Interstate	[REDACTED]	[REDACTED]
Intrastate	[REDACTED]	[REDACTED]
Universal service support - federal	[REDACTED]	[REDACTED]
Internet	[REDACTED]	[REDACTED]
Miscellaneous		
Equipment	[REDACTED]	[REDACTED]
Carrier billing and collection	[REDACTED]	[REDACTED]
Other	[REDACTED]	[REDACTED]
Uncollectible	[REDACTED]	[REDACTED]
Total operating revenues	[REDACTED]	[REDACTED]
Operating expenses		
Plant specific operations	[REDACTED]	[REDACTED]
Plant nonspecific operations	[REDACTED]	[REDACTED]
Depreciation	[REDACTED]	[REDACTED]
Customer operations	[REDACTED]	[REDACTED]
Corporate operations	[REDACTED]	[REDACTED]
Other operating taxes	[REDACTED]	[REDACTED]
Nonregulated	[REDACTED]	[REDACTED]
Net operating income	[REDACTED]	[REDACTED]
Nonoperating income (expense)		
Interest and dividend income	[REDACTED]	[REDACTED]
Other nonoperating income (expense)	[REDACTED]	[REDACTED]
Income before income taxes	[REDACTED]	[REDACTED]
Income tax expense	[REDACTED]	[REDACTED]
Net income	\$ [REDACTED]	\$ [REDACTED]

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## ARMSTRONG TELEPHONE COMPANY - NORTH, INC. STATEMENTS OF CASH FLOWS

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	Years Ended September 30,	
	2012	2011
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Net income	\$ [REDACTED]	\$ [REDACTED]
Adjustments to reconcile net income to net cash from operating activities		
Depreciation	[REDACTED]	[REDACTED]
Deferred income taxes	[REDACTED]	[REDACTED]
Change in assets and liabilities		
Receivables	[REDACTED]	[REDACTED]
Material and supplies	[REDACTED]	[REDACTED]
Other assets	[REDACTED]	[REDACTED]
Accounts and taxes payable	[REDACTED]	[REDACTED]
Advance billing	[REDACTED]	[REDACTED]
Other accrued liabilities	[REDACTED]	[REDACTED]
Net cash from operating activities	[REDACTED]	[REDACTED]
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Net acquisition of property, plant, and equipment	[REDACTED]	[REDACTED]
<b>NET CHANGE IN CASH AND CASH EQUIVALENTS</b>	[REDACTED]	[REDACTED]
<b>CASH AND CASH EQUIVALENTS at beginning of year</b>	[REDACTED]	[REDACTED]
<b>CASH AND CASH EQUIVALENTS at end of year</b>	\$ [REDACTED]	\$ [REDACTED]
<b>SUPPLEMENTAL DISCLOSURE OF CASH FLOWS INFORMATION</b>		
Cash paid during the year for		
Income taxes	\$ [REDACTED]	\$ [REDACTED]